PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10796559

CLAIMS AS FILED - PART I									NTITY		OTHER	THAN
	· · · · · · · · · · · · · · · · · · ·		(Column 1)					TYPE -		OR		
TOTAL CLAIMS			18				F	ATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	385.00	OR	BASIC FEE	770.00
TO	TAL CHARGEA	BLE CLAIMS	16 minus 20=				×	\$ 9=		OR	, X\$18=	
_	EPENDENT CL			ius 3 =			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(43≈		OR	X86=	
MU	LTIPLE DEPEN	RESENT		·		-	145=		OR	+290=		
* If the difference in column 1 is less t				s than zero, enter "0" in col			T	DTAL		OR	TOTAL	
\ \{ \}	148	AIMS AS A	MENDED	(Column 2) (Column 3)			Si	MALL	ENTITY	: OR	OTHER SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUŞLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE .
	Total	. 78	Minus	4 2		• 8	X\$ 9=	\$ 9=		OR	X\$18=	400
	Independent FIRST PRESE	NTATION OF MI	Minus JETIPLE DEP	ENDENT	CLAIM	· 2	×	43=		OR	X86=	400
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=		OR	+290=	
							ADD	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	SOU
_	(Column 1) (Column 2) (Column 3)									•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA	P	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		2	X\$	\$ 9=		OR	X\$18=	
	Independent		Minus	***		= .	7	(43=		OR	X86=	·
L	FIRST PRESE	ULIJPLE DEF	ENDEN	CLAIM			145=		OR	+290=		
						•	L_	TOTAL		OR	TOTAL	•
(Column 1) (Column 2) (Column 3)								IT. FEE		1011	ADDIT. FEE	·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	ÆST IBER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	1 11		=	X	\$ 9=		OR	X\$18=	
	Independent	4	Minus	444 ·	<u> </u>	ŧ	T _x	43=		•	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDEN									OR	700-	
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.								45= .		OR	+290=	
. •	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT, FEE	
	The 'Highest Nun	nber Previously Pa	id For" (Total or	Independ	enl) is the	highest number	lound ir	the app	ropriale box	in coli	unin 1.	